

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**American College of Surgeons Professional Association PAC**

Full Name (Last, First, Middle Initial)

**A. John A. Adeniyi**

Mailing Address 708 Saddleback Cir

City

Bridgeport

State

WV

Zip Code

26330-9652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Associated Specialist, Inc.

Occupation

Surgeon

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2015

**Transaction ID : C807B176EE479738CC2**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Adnan Ali Alseidi**

Mailing Address Department of Surgery

Virginia Mason Medical Center

City

Seattle

State

WA

Zip Code

98101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Virginia Mason Medical Center

Occupation

HPB &amp; Endocrine surgeon

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : 11A50A934618C76C483**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. John David Alston**

Mailing Address 603-2 N Progress Ave

Ste 200

City

Siloam Springs

State

AR

Zip Code

72761-4206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NW AR Surgical Clinic

Occupation

Surgeon

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

**Transaction ID : E61BD3BD1757A1D66BE**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1250.00

**TOTAL** This Period (last page this line number only)..... ►